VIA E-FILE   PATENT APPLICATION
                                                    Docket No. 14531.152

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of   )
)
                        Dr. Steven Ericsson Zenith   )
)
Serial No.:   09/504,327   ) Art Unit
) 2173
Filed: February 14, 2000   )
)
Conf. No.:   7756   )
)
For: INTERACTIVE MULTI MEDIA USER   )
                   INTERFACE USING AFFINITY BASED   )
                   CATEGORIZATION   )
)
Examiner: Raymond J. Bayerl   )
)
Customer No.:   047973 (newly assigned)   )

PETITION UNDER C.F.R. § 1.17(a)(3)
THREE (3) MONTH EXTENSION OF TIME

VIA E-FILE PETITION
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Pursuant to 37 C.F.R. § 1.136(a), it is respectfully requested that the shortened statutory

period which was set for responding to the Office Action dated June 10, 2005, be extended for three

(3) months from September 10, 2005 until December 10, 2005.

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Payment in the amount of $1020.00 set forth in 37 C.F.R. § 1.17(m) for filing this Petition under 37 C.F.R. § 1.137(b) will be paid by Credit Card payment option in E-Filer with RAM to cover the fees with respect to this Petition.

The Commissioner is hereby authorized to charge any fee or to credit any overpayment in connection with this Petition to Deposit Account No. 23-3178 as set forth in 37 C.F.R. § 1.17.

Dated this 9th day of June, 2006.

Respectfully submitted,

JENS C. JENKINS
Registration No. 44,803
Attorney for Applicant
Customer No. 047973

JCJ:ahy
AHY0000000578V001

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UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND

1 Date of Request:	11/20/06	2 Serial/Patent #	09/504,327

3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED	6 AMOUNT
	Filing			$
	Amendment			$
X	Extension of Time	WFEE	06/09/06	$ 1,020.00
	Notice of Appeal/Appeal			$
	Petition			$
	Issue			$
	Cert of Correction/Terminal Disc.			$
	Maintenance			$
	Assignment			$
	Other			$

7 TOTAL AMOUNT OF REFUND	$ 1,020.00

8 TO BE REFUNDED BY:

10 REASON:			8	Treasury Check
	Overpayment		X	Credit Deposit A/C #:
	Duplicate Payment		9	2 3 - 3 1 7 8
X	No Fee Due (Explanation):			*Credit Card*

Extenison of time filed after extendable period

11 REFUND REQUESTED BY:

TYPED/PRINTED NAME:	Sherry D. Brinkley	TITLE:	Petitions Examiner
SIGNATURE:	*Sherry D. Brinkley*	PHONE:	2-3204
OFFICE:	Petitions		

****

THIS SPACE RESERVED FOR FINANCE USE ONLY:

APPROVED:	*CHECK*	DATE:	11/21/06

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

Office of Finance
Refund Branch
Crystal Park One, Room 802B

FORM PTO 1577
(01/90)